



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY OF NEW BEDFORD

File with:

City or Town Clerk or Election Commission

Please print or type all information, except signatures. 2013 SEP 30 PM 1 33

Fill in dates:

Reporting Period Beginning

Month

Date

Year

Ending

Month

Date

Year

Type of report: (Check one)

☒ 8th day preceding preliminary

☐ 8th day preceding election

☐ 30 day after election

☐ year-end report

☐ dissolution

Full Name of Candidate (if applicable)

Craig Dixon
City Council Ward Five

Office Sought and District

98 Westview St.

Residential Address

New Bedford, MA 02740

Tel. No. (optional)

Committee Name

Name of Committee Treasurer

Committee Mailing Address

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report

\$ 0

Line 2: Total receipts this period (page 2, line 11)

\$ 3790.00

Line 3: Subtotal (line 1 plus line 2)

\$ 3790.00

Line 4: Total expenditures this period (page 3, line 14)

\$ 3665.37

Line 5: Ending balance (line 3 minus line 4)

\$ 124.63

Line 6: Total in-kind contributions this period (page 4)

\$ 0

Line 7: Total (all) outstanding liabilities (page 4)

\$ 2000.00

Line 8: Name of bank(s) used

Sovereign Bank

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☒ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate signature (in ink)

Date

9/29/13

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total receipts in excess of \$50 (or listed above)		2720 00	
Line 10: Total receipts \$50 and under* (not listed above)		1070 00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		3790	Enter on page 1, line 2

* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

Date Received	Name	Address	Amount	Occupation
9/15/2013	Carl Beckman	190 Bedford Street, New Bedford MA, 02740	60.00	
9/7/2013	Antonio Borges	78 Westview Street, New Bedford 02740	60.00	
9/14/2013	Lori Chandler	92 Westview Street, New Bedford 02740	60.00	
9/21/2013	Erin Cranstoun	282 Carroll Street, New Bedford MA 02740	90.00	
9/21/2013	Brian DeMelo	102 Westview Street, New Bedford MA 02740	50.00	
9/7/2013	Brenda Dixon	1245 Roseanne Street, New Bedford MA, 02740	50.00	
7/1/2013	Deb Dixon	98 Westview Street, New Bedford MA 02740	100.00	
7/25/2013	Keith Dixon	39 Malbone Street, Lakeville MA, 02347	250.00	Salesman, Martinetti
9/15/2013	Sarah Dixon	39 Malbone Street, Lakeville MA, 02347	200.00	Salesman, Martinetti
9/15/2013	James Dury	35 Maple Street, New Bedford MA, 02740	60.00	
9/15/2013	Shawn Dury	329 Maple Street, New Bedford MA 02740	120.00	
9/29/2013	Christian Farland	555 Lantern Lane, New Bedford MA 02740	100.00	
9/14/2013	Brian Iacaponi	1109 Walnut Plain Road, Rochester MA, 02770	50.00	
9/14/2013	Richard Lally	6 Donna Lane, Acushnet MA, 02743	60.00	
9/24/2013	Albert Leboeuf	66 Gifford Lane, New Bedford 02740	60.00	
9/7/2013	Jennifer Longo	35 Azalea Drive, Dartmouth MA 02747	60.00	
9/24/2013	Robert Maccini	146 Cornell Street, New Bedford MA 02740	100.00	
9/15/2013	Kevin Medeiros	26 Lantern Lane, New Bedford, 02743	60.00	
9/15/2013	Neil Mello	88 Rotch Street, New Bedford MA 02740	30.00	Chief of Staff, City of New Bedford
9/15/2013	Jon Mitchell	15 Moreland Terrace, New Bedford MA, 02740	30.00	Mayor, City of New Bedford
9/15/2013	Kristen Nelson	14 Whalers Way, Dartmouth MA, 02747	150.00	
9/14/2013	Maurice Paquette	3 Blackview Drive Dartmouth, MA 02747	300.00	Lab Technician, Southcoast Medical Group
9/24/2013	Ann Partridge	15 Moreland Terrace, New Bedford MA, 02740	30.00	
9/15/2013	Maryanna Plante	88 Armour Street, New Bedford MA, 02740	150.00	
9/14/2013	John Seed	83 Westview Street, New Bedford MA 02740	60.00	
9/7/2013	Marilyn Smith	148 Westview Street, New Bedford MA 02740	60.00	
9/15/2013	Kathy Thomas	31 Brandt Beach Road, Mattapoisett MA, 02738	60.00	
9/15/2013	Kevin Thomas	61 State Street, New Bedford MA, 02740	60.00	Consultant, LRM Consulting
7/11/2013	Kevin Thomas	61 State Street, New Bedford MA, 02740	100.00	Consultant, LRM Consulting
9/15/2013	Melvin Yoken	261 Carroll Street, New Bedford MA 02740	100.00	
Total Itemized			2,720.00	
Unitemized			1,070.00	
Grand Total			3,790.00	

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
9/10/13	Cork	90 Front Street N.B., MA 02740	Fundraiser Deposit	200	00
9/18/13	Cork	90 Front Street N.B. MA 02740	Fundraiser	1820	00
9/26/13	Fairhaven True Value Hardware	23 Popes Island N.B MA 02740	Signage Materials	25	49
9/25/13	Home Depot	470 State Road Dartmouth MA, 02747	Signage Materials	34	55
7/30/13	RetroActive Outlet	67 Clifford Street N.B MA 02745	Campaign Signs	1000	00
9/10/13	RetroActive Outlet	67 Clifford Street N.B MA 02745	Campaign Signs	395	13
8/16/13	RPI Printing	135 Waldron Road Fall River MA 02720	Campaign Literature	107	00
9/27/13	RPI Printing	135 Waldron Road Fall River MA 02720	Campaign Literature	54	00
6/25/13	Sovereign Bank	1 Sovereign Way RI 1 FV 0223 E. Providence RI 02915	Campaign Checks	29	20
Line 12: Expenditures over \$50				3665	37
Line 13: Expenditures \$50 and under*				0	
Line 14: TOTAL EXPENDITURES				3665	37

Enter on page 1, line 4

*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	0
			Line 16: In-kind \$50 and under	0
			Line 17: Total In-kind	0

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
6/17/13	Craig Dixon	98 Westview Street N.B. MA 02740	Campaign Funding	200.00
7/26/13	Craig Dixon	98 Westview Street N.B. MA 02740	Campaign Funding	800.00
7/29/13	Craig Dixon	98 Westview Street N.B. MA 02740	Campaign Funding	1000.00
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	2000.00